

SELF SERVICE CENTER

INSTRUCTIONS: HOW TO FILL OUT THE "CROSS EXPEDITED PROCESS REQUEST TO ENFORCE"

USE THIS FORM only if you are trying to make someone obey a court order regarding child support, medical insurance coverage, spousal maintenance/support, custody, and/or parenting time (formerly known as "visitation"). **YOU DO NOT NEED TO USE THIS PAPERWORK TO FILE A RESPONSE.** However, this is your opportunity to request the court to consider additional issues not included in the "**Expedited Process Request to Enforce**" which you were served with. Match the numbered instructions to the numbers on the "**Cross Expedited Process Request to Enforce.**" **TYPE OR PRINT USING BLACK INK.**

- | NUMBER | INSTRUCTION |
|---------------|--|
| (1) | YOUR name, address, home telephone number and DAYTIME telephone number (the number where you can be reached Monday through Friday from 8:00 a.m. to 5:00 p.m. or where a message may be left for you). If your daytime phone number is the same as your home phone number, enter your home phone number as your daytime phone number. |
| (2) | If you have NOT obtained the services of an attorney, check the box that says "Self". If you HAVE obtained the services of an attorney, the attorney must write YOUR name. |
| (3) | If you have obtained the services of an attorney, the attorney must provide his or her State Bar number. |
| (4) | If you are requesting enforcement of your child support order and you have an application with the State of Arizona, Department of Economic Security for enforcement of your child support order, list your ATLAS number. |
| (5) | Name of the party listed as the petitioner on the court order(s) you want to enforce or make the other party obey. |
| (6) | Name of the party listed as the respondent on the court order(s) you want to enforce or make the other party obey. |
| (7) | Superior Court of Arizona in Maricopa County Family Court case number listed on the court order(s) you want to enforce or make the other party obey. This number starts with " DR " or " D " or " FC. " |
| (8) | Mark the box or boxes which indicate(s) the type(s) of order(s) for which you are requesting enforcement. |
| (9) | Date that you were served with the " Expedited Process Request to Enforce. " |

The following instructions apply if you have marked one or more of the following boxes: Child Support, Child Support Arrearage Only, Medical Insurance Coverage and/or Spousal Maintenance/Support.

- (10) Date(s) of the order(s) you want to have enforced.
- (11) Name of the party who owes you child support, spousal maintenance/support **and/or** has not obtained medical insurance coverage.
- (12) Name of the judicial officer(s) who signed your order(s).
- (13) Amount of support the court ordered the other party to pay **and** the **EXACT** wording of the order(s) you want to have enforced. If you do not have a copy of your order(s), attempt to obtain a copy by going to Court Records located on the first floor of the Courthouse in Mesa, or the lower level of the Central Courthouse Building in Phoenix. If you are unable to obtain a copy, state in your own words, as accurately as possible, what the order said.
- (14) Total amount of support that is past due. To determine the past due amount:
A. Calculate the total amount of support which should have been **paid** to you to date;
B. Calculate the total amount of support you have **received** (including **direct** payments) to date;
C. **SUBTRACT** the total amount received from the total amount due. This is the past due amount (this amount does not include the amount of interest to which you are entitled).
- (15) Time period for which you claim the past due support was not paid.
- (16) If you wish the court to consider an action which is not listed, state what the action is you wish the court to consider.

The following instructions apply only if you are asking to have a custody and/or parent/child access (parenting time) order enforced.

- (17) Date(s) of the order(s) you want to have enforced.
- (18) Name of the judicial officer(s) who signed your order(s).
- (19) **EXACT** wording of the order(s). If you do not have a copy of your order(s), attempt to obtain a copy at Court Records located on the first floor of the Courthouse in Mesa, or the lower level of the Central Court Building in Phoenix. If you are unable to obtain a copy, state in your own words, as accurately as possible, what the order said.
- (20) Name of the party whom you claim violated the order(s).
- (21) Write a **brief** summary describing how the terms of the order(s) were violated.
- (22) If you wish the court to consider an action which is not listed, state what the action is you wish the court to consider.

- (23)** Check the box to show whether you will mail, deliver or faxed a copy of this document to the other party. Then write in the other party's name.
- (24)** Write in the address you used to mail, deliver, or fax a copy of this document to.
- (25)** Sign only when you are before a Notary Public or Deputy Clerk of the Court. Your signature acknowledges that the information you have provided is true and correct to the best of your knowledge and belief.